Attorney/Docket No: USP1694A-DS2

DECLARATION FOR PATENT APPLICATION

As a below named inventor, I here	by declare that:			
My residence, post office address	and citizenship are as state	ed below next to my name.		
I believe I am the original, first inventor (if plural names are liste the invention crititled Gum Disposal Pocket	d below) of the subject n	eatter which is claimed and	or an original, first and joint for which a patent is sought on	
the specification of which is attack was filed on Number	hed heroto unless the folio as United Sta and was ame	tes Application Number or F	PCT International Application (if applicable).	
I hereby state that I have review claims, as amended by any amend I acknowledge the duty to disclos I hereby claim foreign priority certificate listed below and have a filing date before that of the approximation.	iment referred to above c information which is ma benefits under 35 USC also idontified below any t	terial to patentability as defi- 119 of any foreign applicat oreign application for patent	ned in 37 CFR 1.56. tion(s) for patent or inventor's	
Prior Foreign Application(s)			Priority Claimed ☐ Ycs ☐ No	
(Number)	(Country)	(Day/Month/Year File		
(Number)	(Country)	(Day/Month/Year File		
(Number)	(Country)	(Day/Month/Year File		
manner provided by the first ps material to patentability as defi application and the national or Po (Application Number)	ned in 37 CFR 1.56 wh	ich became available between of this application.	en the filing date of the prior tented, pending, ahandoned)	
(Application Number)	(Filing Da	te) (Status-pa	(Status-patented, pending, abandoned)	
I hereby appoint the following at this application and to transact al Raymond Yat Chan, I Address all correspond Telephone Calls to: (62) hereby declare that all Statem information and belief are belief willful false statements and the 1 Title 18 of the United States Coor any parent issued thereon.	I business in the Patent an Reg. No. 37,484 cnce to: 1050 Oakdale Lr 16) 571-9812 tents made herein of my- yed to be true; and furthe like so made are punishab	d Trademark Office connected., Arcadia, CA 91006 own knowledge are true as that these statements were the by fine or imprisonment.	nd that all statements made on made with the knowledge that or both, under Section 1001 of	
Full name of sole or first invento	r (given name, family nar)	e) Nicoletta M. Smith		
Inventor's signature	oletta Smi	H Date	01-21-02	
Residence Same as below	5. 5. 6. 4.4. 6	Citize	nship U.S.A.	
Post Office Address 1613 Ch	elsea Rd., Suite 141, S	an Marino, CA 91108		
Fuil name of second joint invento	or, if any (given name, fan	nily name)		
Second Inventor's signature	41	Date		
Residence		Citize	nship	
Post Office Address Additional inventors are being	g named on separately nur	nbored sheets attached herete	λ,	

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VE)	RIFIED STATEM STATUS (37 CF)	IENT (DECLARATION) CLA R 1.9 (f) and 1.27 (b)) - INDEPE	IMING SMALL E NDENT INVENTO	NTITY PR
1 0 (c) for nurno	ses of naving raduc	by declare that I qualify as an in ted fees under section 41 (a) and (regard to the invention entitled:	(b) of line 33, Chief	1 States Code, to the
Gum Disposa	l Pocket			described in:
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l have not assig assign, grant, co independent inv would not quali CFR 1.9 (c).	gned, granted, com- nivey or license, ar- centor under 37 CF fy as a small busin	veyed or licensed and am under ny rights in the invention to any R 1.9 (c) if that person had mad- ness concern under 37 CFR 1.9 (ion to which I have assigned, gr w to assign, grant, convey, or lice	r no obligation under person who could as the invention, or to d) or a non profit of anted, conveyed, or	or contract or law to bot be classified as an any concern which rganization under 37 dicensed or am under
pers		n, or organization anizations listed below* statements are required from eac	h named nerson, cor	ncern or organization
having r	ights to the inventi-	on averring to their status as sma	Il enfities. (37 CFR 1.	27)
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FULL NAME				
ADDRESS _	□INDIVIDUAL	SMALL BUSINESS CONCERN	□NONPROFIT C	RGANIZATION
land of antitlem	ant to email ontity	this application or patent, notifi status prior to paying, or at the t the date on which status as a sma	ime of naving, the ea	irliest of the issue tee
1.28 (b)) I hereby declar on information knowledge tha	te that all statement and belief are be t willful false state ction 1001 of Title validity of the app	is made herein of my own knowledged to be true; and further thements and the like so made are 18 of the United States Code, a plication, any patent issuing the	edge are true and that hat these statements a punishable by fine and that such willful	all statements made were made with the or imprisonment, or false statements may
Nicoletta M. NAME OF IN		NAME OF INVENTOR	NAME OF I	NVENTOR
Signature of In	etta Sm	Signature of Inventor	Signature of	Inventor

Date